

WATERSHED PROTECTION DIVISION UPDATE CALL LOG-IN REPORT

City of Los Angeles
Department of Public Works
Bureau of Sanitation



Call ID Number: 26035		Date of Call: 03/22/2016		Time of Call: 0800AM	
Caller Name:		Type of Caller: Referral Agency			
Caller Address: Los Angeles CA					
Call Telephone:					
Nature of Complaint: Homeless Encampment					
Details of Complaint: authorization 2016-00150 call completed 3/22/16 by MM/AS HOMELESS ENCAMPMENT CLEANUP					
Discharge Location: Street No.: 300		Street Dir.: N		Street Name: Juanita Avenue	
Address Comment: Beverly		Thgd Pge/Grid: 594 A7		ZIP: 90004	
Call Received by: STEVE PEDERSEN					
Agency Contacted:					
Agency Rep Contacted:					
SMD Response to Complainant:					
Enforcement Actions: <input type="checkbox"/> NTC <input type="checkbox"/> Referred to DA <input type="checkbox"/> Referred to EPA <input type="checkbox"/> Referred to Other (specify): <input type="checkbox"/> Verbal Warning <input type="checkbox"/> NOV <input type="checkbox"/> Referred to City Attorney					
CT./Notice/Order No.:			Manifest No.:		
Enforcement Comments:					
Was Complaint Resolved:		Was Caller Informed: N		If Yes, Date Informed:	
Investigating Inspector: MICHAEL MILLER		Second Responder: ADAM SMITH		Date of Report: 09/29/2016	
Senior Inspector Review:		Date:			



CITY OF LOS ANGELES WATERSHED PROTECTION DIVISION COMPLAINT INVESTIGATION REPORT

Date: 03/22/2016

Time: 0800AM

CASE ID NUMBER: 26035

Purpose: Homeless Encampment

Inspectors: MICHAEL MILLER

ADAM SMITH

Facility Name:

Location: 300 N Juanita Avenue
Los Angeles 90004

Cross Street: Beverly

NOTES: WPD Environmental officers Miller and Smith along with Clean Harbors and Sanitation Solids arrived at the site location. A full cleanup was performed. See documents section.

Inspector's Name: MICHAEL MILLER

INSPECTOR'S SIGNATURE _____

DATE SIGNED _____

SENIOR INSPECTOR'S SIGNATURE _____

DATE SIGNED _____

LASAN - WPD ENFORCEMENT: PIMS Number 26035

CATEGORY	300 N Juanita		
			TOTAL - BOTH TEAMS
Solid Waste (tons)			2
Property Locations/Sites processed (includes individuals asked to move their belongings)			4
Bags/items sent to storage (The Bin)			0
Enforcement citations issued (all types)			0
Requests/education for services			0
Non-RCRA urine/feces lbs./gallons			80
Feces container(s) location(s)			2
Urine container(s) location(s)			5
Non-RCRA paint waste lbs./gallons			50
paint containers			2
Non-RCRA waste oil lbs./gallons			0
oil containers			0
RCRA Hazardous Waste lbs./gallons			70
Toxic (pesticides, herbicides, metals) container(s)			0
Sharps (needles, razors, shavers)			40
Drug paraphernalia			1
Reactive (oxidizers, peroxides, water rx) container(s)			0
Ignitable (flammable/combustible) container(s)			11
Corrosive (2<pH>12.5) container(s)			0
Waste batteries			2
Vectors location(s)			0
Piles/Locations with Rodents			0
Piles/Locations with Parasites (lice, bed bugs, fleas etc.)			0

METRICS

	Piles/Locations with Dead animal carcass				0	
	Piles/Locations with Cockroaches				0	
	The Bin (Venice)				0	
	Property returned to owner				0	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CA 911111010	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 009494559 FLE			
5. Generator's Name and Mailing Address Los Angeles City of Bo 2714 Media Center Drive Watershed Protection Division # 7025 Los Angeles, CA 90068 Generator's Phone: (323) 347-1671 ATTN: Steve Pedersen								
6. Transporter 1 Company Name Clean Harbors Environmental Service, Inc U.S. EPA ID Number MAD039322260								
7. Transporter 2 Company Name U.S. EPA ID Number								
8. Designated Facility Name and Site Address Clean Harbors Deer Park, LLC 2027 Independence Parkway South La Porte, TX 77571 Facility's Phone: 2819302300 U.S. EPA ID Number IXD055141378								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes	
	1. UN2814, INFECTIOUS SUBSTANCES, AFFECTING HUMANS, (SHARPS), 6.2							
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information 1. CH659479								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____								
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/text: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: ESTEVA DE LA FORRE Signature _____ Month _____ Day _____ Year _____ Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____								
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. _____ 2. _____ 3. _____ 4. _____								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____								

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

SC MA PPW 2/18/2016

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CA 9111111019	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 009494536	FILE	
5. Generator's Name and Mailing Address Los Angeles City of Env 2714 Media Center Drive Watershed Protection Division # 7025 Los Angeles, CA 90065 Generator's Phone: (323) 342-1571 ATTN: Steve Pedersen		Generator's Site Address (if different than mailing address) 200 N. LAMAR BLVD LOS ANGELES, CA 90012					
6. Transporter 1 Company Name Clean Harbors Environmental Service, Inc.		U.S. EPA ID Number MA003932250					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address Clean Harbors Aragonite LLC 11600 North Aptus Road Grantsville, UT 84029 Facility's Phone: 4358944100		U.S. EPA ID Number U10981652177					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
	1.	NONE, NON-RCRA HAZARDOUS WASTE, SOLIDS, (HUMAN FECE), N/A					
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. LASTM-2222							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name: M. Signature: Month: Day: Year:							
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Signature: Month: Day: Year: Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:						
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number:						
	18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator): Month: Day: Year:						
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 2. 3. 4.						
	20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: Signature: Month: Day: Year:						

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

Clean Harbors has the appropriate permits for and will accept the waste the Generator is shipping.

GENERATOR'S INITIAL COPY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

5C MA PPW 2/19/2016

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAS11111019	2. Page 1 of 1	3. Emergency Response Phone (800) 493-3718	4. Manifest Tracking Number 009494521 FLE
5. Generator's Name and Mailing Address Los Angeles City of Bos 2714 Media Center Drive Watershed Protection Division # 7025 Los Angeles, CA 90066 Generator's Phone: (323) 342-1571 ATTN: Steve Pedersen					
6. Transporter 1 Company Name Clean Harbors Environmental Service, Inc.				U.S. EPA ID Number MAD039322250	
7. Transporter 2 Company Name				U.S. EPA ID Number	
8. Designated Facility Name and Site Address Clean Harbors Wilmington LLC 1737 East Denni Street Wilmington CA 90744 Facility's Phone: 3108359998				U.S. EPA ID Number CAD044429836	
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity
	1.				
	2.				
	3.				
	4.				
14. Special Handling Instructions and Additional Information 1. 2. 3. 4.					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____					
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____				
	17. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____				
DESIGNATED FACILITY	18. Discrepancy				
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____				
	18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____				
	Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____				
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. _____ 2. _____ 3. _____ 4. _____				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____					

EPA Form 6700-22 (Rev. 3-05) Previous editions are obsolete.

Clean Harbors has the appropriate permits for and will accept the waste the generator is shipping.

GENERATOR'S INITIAL COPY



127569

Day & Date: TUESDAY 3.22.16
Sales Order #: 1600950412Job Complete: Yes / No (Circle One)Job Description / Comments: ARRIVE ON SITE COLLECT WASTE AND DISINFECT AREAS START: 1300
LEFT SITE: 1650
YARD:Customer: LOS ANGELES CITY OF PO # / COD Amount:
Billing Address: 2714 MEDIA CENTER DRIVE Per Diem: Yes / No (Circle one) If yes, how many?:
LOS ANGELES, CA 90065 Change Order Initiated: Yes / No (Circle One)Contact: ADAM Task # / Description
Job Location: 300 N. JUANITA AVE HOMELESS
LOS ANGELES CA 90004 ENCAMPMENT

Component Type			Task Complete: Yes / No (Circle One)			Task Complete: Yes / No (Circle One)			Task Complete: Yes / No (Circle One)		
Name	Title	ID #	ST	OT	DT	ST	OT	DT	ST	OT	DT
E. MARTINEZ	PM	023007									
E. DE LA TORRE	DEPUTY	70307									
G. MUÑOZ	ET	25311									
V. CASTILLO	ET	25411									

Dispose	Write Description/Destination	Manifest #	Amount	Manifest #	Amount	Manifest #	Amount
SOLID Bulk Drum	<u>SHARPS - 0094945911</u>	<u>1</u>					
SOLID Bulk Drum	<u>ACIDOS. BUNT. FILES - 0094745211</u>	<u>2</u>					
	<u>0094945364</u>	<u>3</u>					

Pickup / Van / Car / Crew Cab (Circle One)	Quantity	Fleet #	# of Hrs/Day	Quantity	Fleet #	# of Hrs/Day	Quantity	Fleet #	# of Hrs/Day
Vacuum Trailer									
Tractor									
Vacuum Truck, Straight									
Box Truck									
Cusco / Guzzler / Vector (Circle One)									
Air Compressor, 175 CFM									
Backhoe Loader 1 Yd bucket									
Bobcat Loader-Mini Excavator									
Back Truck	<u>1</u>	<u>80644</u>		<u>1</u>	<u>80187</u>				

Roll-off Truck, Straight									
Pressure Washer (PSI: _____) Hot / Cold (Circle One)									
Meter Type:									
<u>HAZWASTE LABEL</u>	<u>6</u>								

Material Description	Quantity	Size	Quantity	Size	Quantity	Size
Drum Type: <u>POLY</u>	<u>45</u>					
Drum Type: <u>LID</u>	<u>45</u>					
Receptacle: <u>RING</u>	<u>45</u>					
Drum Type: <u>BLEACH</u>	<u>3</u>	<u>16gal</u>				
Speed Dry						
Polycoated Rain Gear, 22mil						
Poly Sheet, 6mil, 20ft x 100ft						
Poly Bags, 6mil, per roll						
Absorbent Pad (101 Grade) 100/bale						
Absorbent Boom Each						
Absorbent Boom Bale						
Duct Tape/Roll						
Safety Plan						
Roll-off Poly Liner						
<u>5</u> 20 Ltr Poly Drum 1H2 <u>POLY</u>	<u>5</u>					
<u>LID</u>	<u>5</u>					

Container Management				Size	Fleet #	Size	Fleet #	Size	Fleet #					
Roll-off / Intermodal / Frac Tank / Tanker (circle one)														
Roll-off / Intermodal / Frac Tank / Tanker (circle one)														
PPE Sets				Task 1	Task 2	Task 3	Type	Qty	Type	Qty	Type	Qty	Type	Qty
# of Complete Sets of PPE Used:				1			PPED1	4	PPEB2		PPED1		PPEB2	
# of People in PPE:				4										
PPEB1-Level D w/ Tyvek, boots, gloves				PPEC2-Level C w/ (CPF1,2 or Poly Tyvek suit)										
PPEC1-Level C w/ (CPF3 or Saranox suit)				PPEC4-Level C w/ (CPF4 or Bantec suit)										
PPEC3-Level B w/ (CPF2 or Poly Tyvek suit)				PPEB3-Level B w/ (CPF3 or Saranox suit)										
PPEB4-Level B w/ (CPF4 or Bantec suit)				PPEA5-Level A w/ (Responder suit)										
PPEA4-Level A w/ (Responder suit)														
PPEA5-Level A w/ (Responder suit)														
PPEA6-Level A w/ (Responder suit)														
PPEA7-Level A w/ (Responder suit)														
PPEA8-Level A w/ (Responder suit)														
PPEA9-Level A w/ (Responder suit)														
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PPEA364-Level A w/														

PPE Items Used in Addition to Sets Above	Quantity	Type	Quantity	Type	Quantity	Type
Cartridge						
Respirator						
Suit						
Inner Gloves						
Outer Gloves						
Breathing Air Bottle						
Analytical - Analyte Description	# of Tests	Lab Name	# of Tests	Lab Name	# of Tests	Lab Name

Subcontractor Name	Description of Service	Description of Service	Description of Service
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CHES Rep (Print) ERSON Martinez CHES Rep (Sign) [Signature] Date: 3.22.16
Customer (Print) Michael Miller Customer (Sign) [Signature] Date: 3.22.16
CH 225-SS (9/07) IMPORTANT - PAYMENT TERMS ON BACK

CITY OF LOS ANGELES
WATERSHED PROTECTION DIVISION
HEALTH HAZARD CHECKLIST

Date: 3/22/16 Time: 1300 Case Number: 26035

Location Description: 300 N. Juanita

Item Description: Location

Health Hazard Determination : (check all that apply)

- ☐ Toxin / poison
- ☐ Flammable
- ☐ Corrosive
- ☐ Reactive
- ☐ Highly-compressed gas or liquid
- ☒ Motor oil or other petroleum oil
- ☐ Substances listed in Title 22
- ☐ Substances, wastes, or materials which may have come in contact with a hazardous substance or infectious agent.
- ☒ Substances, wastes, or materials which may be a potential health hazard
- ☒ Biohazard / infectious sharp / infested material
- ☒ Contaminated items (see table below)

Contaminated items that were disposed of				
Clothing	Tent	Perishables	Book/toiletries	Others
	Broken tent	food waste		tarp battery items

Comments: _____

WPD Officer Name (Print): Adam Smith Signature: [Signature]

CITY OF LOS ANGELES
WATERSHED PROTECTION DIVISION
HEALTH HAZARD CHECKLIST

Date: 3/22/10 Time: 1325 Case Number: 26035

Location Description: 300 N Trinitas

Item Description: Location 2

Health Hazard Determination :(check all that apply)

- ☐ Toxin / poison
- ☐ Flammable
- ☐ Corrosive
- ☐ Reactive
- ☒ Highly-compressed gas or liquid
- ☐ Motor oil or other petroleum oil
- ☒ Substances listed in Title 22
- ☐ Substances, wastes, or materials which may have come in contact with a hazardous substance or infectious agent.
- ☒ Substances, wastes, or materials which may be a potential health hazard
- ☒ Biohazard / Infectious / sharp / Infested material
- ☒ Contaminated items (see table below)

Contaminated items that were disposed of				
Clothing	Tent	Perishables	Book/toiletries	Others
				bike parts
				bulky items

Comments: _____

WPD Officer Name (Print): Adam Smith Signature: [Signature]

**CITY OF LOS ANGELES
WATERSHED PROTECTION DIVISION
HEALTH HAZARD CHECKLIST**

Date: 3/22/16 Time: 1400 Case Number: 26035

Location Description: 300 N Juvita

Item Description: Location 3

Health Hazard Determination : (check all that apply)

☐ Toxin / poison

☐ Flammable

☐ Corrosive

☐ Reactive

☒ Highly-compressed gas or liquid

☐ Motor oil or other petroleum oil

☐ Substances listed in Title 22

☐ Substances, wastes, or materials which may have come in contact with a hazardous substance or infectious agent.

☒ Substances, wastes, or materials which may be a potential health hazard

☒ Biohazard / Infectious / sharp / infested material

☒ Contaminated items (see table below)

Contaminated items that were disposed of				
Clothing	Tent	Perishables	Book/toiletries	Others
~25 items				also bike parts
				bulky items
				tarp
				stereo
				speaker
				blankets

Comments: _____

WPD Officer Name (Print): Adam Smith Signature: [Signature]

CITY OF LOS ANGELES
WATERSHED PROTECTION DIVISION
HEALTH HAZARD CHECKLIST

Date: 3/22/16 Time: 1:50 Case Number: 26035

Location Description: do 300 N Tenth

Item Description: Location 4

Health Hazard Determination :(check all that apply)

☐ Toxin / poison

☐ Flammable

☐ Corrosive

☐ Reactive

☐ Highly-compressed gas or liquid

☐ Motor oil or other petroleum oil

☒ Substances listed in Title 22

☐ Substances, wastes, or materials which may have come in contact with a hazardous substance or infectious agent.

☒ Substances, wastes, or materials which may be a potential health hazard

☒ Biohazard / infectious / sharp / infested material

☒ Contaminated items (see table below)

Contaminated items that were disposed of				
Clothing	Tent	Perishables	Book/toiletries	Others
				<u>Wicky items</u>

Comments: _____

WPD Officer Name (Print): ADAM SMITH Signature: [Signature]



INVOICE
Invoice No 1001314282

REMIT TO:
Clean Harbors Env. Services
PO Box 3442
Boston, MA 02241-3442

EIN: 04-2698999

RECEIVED

APR 15 2016

OFFICE:
Clean Harbors Environmental Service,
Inc.
2500 East Victoria Street
Compton, CA 90220 - 0000
(310) 764-5851

If you have any questions regarding this invoice, please
contact your customer service representative at the
telephone number listed above

SOLD TO:
Cecilia Consebido
Los Angeles City of
2714 Media Center Drive
Division # 7025
Los Angeles, CA 90065 - 0000

Watershed Protection Division

JOB SITE/GENERATOR:
Los Angeles City of
300 N Juanita Ave
Los Angeles, CA 90004

Man # 9494521
9494559
9494536

Job Description: Homeless Encampment - Adam Smith 562-216-3932

SSPACAMP 213
Case 26035

** Payable in USD funds **

Last Service Date	Invoice No	Customer	Branch	Sales Order	Purchase Order	Terms
22 Mar 2016	1001314282	LO0606	LF	1600930412	C-121334 SECTION 10.1.7	NET 60 DAYS

Last Service Date	Task	Task Type	Description	Total
22 Mar 2016	1600930412-001	GENERAL	Decontamination Services	\$2,412.40

SUBTOTAL \$2,412.40

TAX \$0.00

PLEASE PAY THIS AMOUNT → INVOICE TOTAL \$2,412.40

REMIT PAYMENT BY → DUE DATE 27 May 2016

Date Goods Received: 3/22/16
Date Invoice Received: 4/15/16
Date Vendor Met All City Requirements: _____
BTBC/VRN On File, if applicable: _____
LVO Documents On File, if applicable: _____
EBO Documents On File, if applicable: _____
Approved Insurance On File: yes
Comments: CO 10121334 LI / Case 8
Receipt Verification
I certify that the materials, supplies, or services covered by this
bill were received and/or verified by signed receipt on date
shown below in compliance with the contract terms.
Signature: cp consebido Date: 6/15/16

OKAY TO PAY:

g/c

WORK ORDER:

SSPACALIP 2/3

Interest will be charged at a rate of 1.5% per month for all past due amounts.



INVOICE
Invoice No 1001314282

TASK 1600930412-001 - Decontamination Services

Manifest Info	Item ID	Description	Manifest Qty	Manifest UOM	Billing Qty	Billing UOM	Unit Price	Amount
22 Mar 2016								
	TKUTIL	Stake Body/Utility Truck			5.000	HR	11.2700	\$56.35
	TKUTIL	Stake Body/Utility Truck			3.500	HR	11.2700	\$39.45
	PPED1	Modified Level D (Tyvec, Gloves and Boots)			4.000	EA	11.1000	\$44.40
	PM	Project Manager			3.500	HR	42.1800	\$147.63
	PMOT	Project Manager Overtime			1.500	HR	56.9400	\$85.41
	DRIVER	Driver			3.500	HR	38.8500	\$135.98
	DRIVEROT	Driver Overtime			1.500	HR	52.4400	\$78.66
	LABORER	Environmental Technician			3.500	HR	38.0900	\$133.32
	LABORER	Environmental Technician			3.500	HR	38.0900	\$133.32
	LABELS-HAZ	Hazardous Waste Labels			6.000	EA	1.1100	\$6.66
	DMLINLID	Drum Lid			10.000	EA	8.8800	\$88.80
	DMMATL	Drum Rings/Bolts/Gaskets			5.000	EA	14.4300	\$72.15
	DM5POLY	5 Gal / 20 Litre Poly Drum 1H2/Y1.5/60			5.000	EA	8.8800	\$44.40
	DM16POLY	16 Gal / 70 L Poly Drum 1H2/Y56/S			5.000	EA	22.2000	\$111.00
	DAY	Decon Material			1.000	DAY	6.6600	\$6.66
009494521FLE 1	DISPSL / LCCRQ	AEROSOLS LASTM-9020	1	05DF	1.000	05DF	51.6100	\$51.61
009494521FLE 2	DISPSL / LPTP	PAINT RELATED MATERIALS/LOOSEPACK LASTM-0007	1	16DF	1.000	16DF	183.1500	\$183.15
009494521FLE	TRAN	TRANSPORTATION			1.000	05DM	5.5500	\$5.55
009494521FLE	TRAN	TRANSPORTATION <i>Used for</i>			1.000	DRUM	11.1000	\$11.10
009494559FLE 1	DISPSL / D20	WASTE SYRINGES AND NEEDLES CH859479	1	16DF	1.000	16DF	233.1000	\$233.10
009494559FLE	TRAN	TRANSPORTATION			1.000	DRUM	11.1000	\$11.10
009494536FLE 1	DISPSL / D20R	Human feces LASTM-2222	3	16DF	3.000	16DF	233.1000	\$699.30
009494536FLE	TRAN	TRANSPORTATION			3.000	DRUM	11.1000	\$33.30
SUBTOTAL								\$2,412.40
TAX								\$0.00
TASK TOTAL								\$2,412.40

624 632



Cecilia Consebido <cecilia.consebido@lacity.org>

Equivalent Contract Items

Tue, Jun 14, 2016 at 8:56 AM

Fonseca, Denise Lizzette <fonseca.denise@cleanhARBORS.com>
To: Cecilia Consebido <cecilia.consebido@lacity.org>, "LINTON, TRACY" <LINTON.TRACY@cleanhARBORS.com>
Cc: Robert Vega <robert.vega@lacity.org>, Chuck Turhollow <charles.turhollow@lacity.org>, "GABRIEL, JAVIER" <GABRIEL.JAVIER@cleanhARBORS.com>

Good Morning Cecilia,

The field will normally note bleach when disinfecting any area..

They note bleach but the item is always billed as Decon Material per the day rate.. & the rate can be found on page 72

Decontamination Materials	6.66	Per Day
---------------------------	------	---------

what I can do is have the field start noting "Bleach - Decon Material" on their worksheets if this helps avoid any issues with Accounting..

they would still need to note bleach for our own data entry purposes..

Waste Syringes & Needles can be found on page 74 of the disposal rate contracts under "Medical/Biohaz's Waste"..

The profile is going to be submitted for modification so that it lists "medical/biohaz waste", moving forward as of tomorrow the profile will be modified & match the contract description better.

Medical/Biohaz's Waste (Human Feces)	116.55	233.10	233.10	291.37	388.50	563.32		
--------------------------------------	--------	--------	--------	--------	--------	--------	--	--

Used oils can be found on page 75 of the contract

Non-RCRA Waste Oil	18.32	36.63	36.63	45.78	61.05	88.52	0.66	gallon
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the profile that used to bill out waste oil, is LAWSP-0002 & currently reads NON-RCRA HAZARDOUS WASTE, LIQUIDS, (OIL)

Please let me know if accounting is okay with the explanation.

Thanks

Safety Starts with Me: Live It 3-6-5

Job Description / Comments: **HAZARDOUS WASTE** / **START 1300** / **LEFT SITE 1650** / **WATER**

AND DISINFECT VENTAS

Customer: **LOS ANGELES** / **1100 4F** / **PD # / CDD Amount:** **1800** / **1830**

Billing Address: **2714 ALDIA** / **Center Blvd** / **Per Diem: Yes / No (Circle one)** / **Yes, how many?**

LOS ANGELES, CA 90063 / **Change Order Initiated: Yes / No (Circle One)**

Task # / Description	Task # / Description	Task # / Description
1. Homeless Encampment		

Contact: **Adams**

Job Location: **300 N. TURNER AVE** / **LOS ANGELES, CA 90004**

Component Type	Task Complete (Circle One)	Task Complete (Circle One)	Task Complete (Circle One)	Task Complete (Circle One)	Task Complete (Circle One)
F. MARTINEZ / PM / 023007 / 1300 / 1830					
E. DE LA TORRE / DEVELO / 7070 / 1300 / 1830					
G. ALVAREZ / ET / 2531 / 1300 / 1630					
V. CASTILLO / ET / 2541 / 1300 / 1630					

LIQUIDS: Bulk / Drum

BODILY: Bulk / Drum

Pickup / Vol / Car / Crew Cab (Circle One)

Vacuum Trailer

Tractor

Vacuum Truck, Straight

Box Truck

Quisco / Gilder / Vector (Circle One)

Air Compressor, 175 CFM

Backhoe Loader 1 Yd Bucket

Bobcat Loader - Mini Excavator

Flat Truck

Roll-off Truck, Straight

Pressure Washer (PSI:) Hot / Cold (Circle One)

Motor Type:

HAZARDOUS LABEL

Drum Type: **POLY**

Drum Type: **LID**

Drum Type: **PINK**

Drum Type: **BLEACH**

Drum Type: **3**

Drum Type: **16 GAL**

Polycoated, 22mil, 200 x 100ft

Poly Bags, 22mil, per roll

Absorbent, 100lb (100 Grade) 100lb

Absorbent, 100lb (100 Grade) 100lb

Absorbent, 100lb (100 Grade) 100lb

Dust Tape/Seal

Safety Plan

Roll-off Poly Liner

5 Gall / 20 Lbs Poly Drum 112

5 Gall / 20 Lbs Poly Drum 112

5 Gall / 20 Lbs Poly Drum 112

Roll-off / Intermediate / Frac Tank / Tanker (circle one)

Roll-off / Intermediate / Frac Tank / Tanker (circle one)

of Complete Sets of PPE Used:

PPE1	PPE2	PPE3	PPE4	PPE5	PPE6	PPE7	PPE8	PPE9	PPE10

Cartridge

Respirator

Gloves

Inner Gloves

Outer Gloves

Breathing Air Bottle

CHES Rep (Print)

Customer (Print)

CHES Rep (Sign)

Customer (Sign)

IMPORTANT - PAYMENT TERMS ON BACK

DATE: 1-27-16

DATE: 1-27-16

CASE# 26035

Call Out Sheet/City of Los Angeles LO0606/LO0606

Multiple Stop ER YES or NO please Circle Stop 3 of 3

Call Received: Date: 2-22-16 Time: 1300

Time left shop _____ time arrived site 1300 Time left site 1600

time arrived TSDF 1730 time left TSDF 1800 Time arrived shop/Next Stop 1830

CHES Employee taking call _____

Department _____ Mail Stop 756

Bureau Sanitation Work Order# _____

Division Watershed Protection Agency Division # 7025

Caller's Return Phone No. _____ Name: _____

Type of Incident ☐ Spill ☐ Dump ☒ Other
Time of Incident: _____ ☐ PM ☐ AM

Is material an IMMEDIATE environmental hazard (ex. Waste running down street OR can it be scheduled for pick up at a later date (ex. An abandoned drum in alleyway)? Y N

City official Will Always be Required to Sign Manifests - No EXCEPTIONS

City Representative's Name? Michael Miller
Signature of City Representative _____

Location of Incident 300 N JUANITA AVE
LOS ANGELES CA 90004

Case # _____ Thomas Guide Page/Grid _____

Major Cross Streets _____
Nature of Incident:
How much spilled? _____ Over what area? _____ Traffic Lane Closed?
Sewers/Storm Drained Involved? _____ Amt. Of Absorbent Down?
Inventory of Materials/Chemicals? _____

_____ HOMELESS ENCAMPMENT

SWO# 1600930412 MANIFEST# 009494558 FLE 009494536 FLE
009494521 FLE

Internal Use Billable Hours	
Hours travel to site (1 hour max/2 after hours)	_____
Hours on site	<u>3</u>
Hours Travel to Disposal Facility	<u>1.5</u>
Hours Depart Disposal Facility	<u>.5</u>
Hours Return to Shop (1 hr Max)	<u>.5</u>
Hours to Subirect (Lunch)	<u>-.5</u>
Total Hours to BB	<u>5</u>

JOB DATE: 2/22/16

4 16
5 5

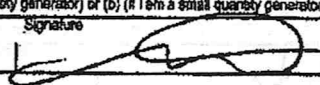
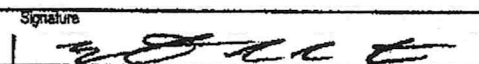

160093041Z

CASA# 26035

SC MA PPW 2/18/2016

55/241CID 217
Form Approved, OMB No. 2050-0039

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAS111111019	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 009494521 FLE			
5. Generator's Name and Mailing Address Los Angeles City of Bos 2714 Media Center Drive Watershed Protection Division # 7025 Los Angeles, CA 90085 Generator's Phone: (323) 342-1571 ATTN: Steve Pedersen								
6. Transporter 1 Company Name Clean Harbors Environmental Service, Inc.								
7. Transporter 2 Company Name								
8. Designated Facility Name and Site Address Clean Harbors Wilmington LLC 1737 East Denni Street Wilmington, CA 90744 Facility's Phone: 3108358998								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. UN1950, WASTE AEROSOLS, (EACH NOT EXCEEDING 1 L CAPACITY) 2.1			1 DF		30	P	000 33/
	2. UN1263, WASTE PAINT, 3, PG III (LOOSEPACK)			1 DF		50	P	900 29/ 33/ 343
	3.							
	4.							
14. Special Handling Instructions and Additional Information 1. LASTM - 9020 1X56AL DF 2. LASTM - 0007 1X166AL DF 3. 4.								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name: Michael M. De La Torre Signature:  Month: 03 Day: 22 Year: 16								
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: ESTEBAN DE LA TORRE Signature:  Month: 03 Day: 22 Year: 16 Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:								
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number: Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month: Day: Year:								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H111 2. H111 3. 4.								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name: Bob W. W. W. Signature:  Month: 03 Day: 22 Year: 16								

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

Clean Harbors has the appropriate permits for and will accept the waste the generator is shipping.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

1600930412

CASE# 26035

SI. MA PRW 2 IS 2004

SEP21CID 213

Please print or type (Form designed for use on a 12-column typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number A S 1 1 1 1 1 0 1 9		2. Page 1 of 1		3. Emergency Response Phone (800) 483-3718		4. Manifest Tracking Number 009494559 FLE		
5. Generator Name and Address Los Angeles City of Bos 2714 Media Center Drive Watershed Protection Division # 1029 Los Angeles CA 90065 Contact: (323) 342-1571 ATTN: Steve Pedersen		6. Generator's Site Address (if different than mailing address) 300 N JUANITA AVE LOS ANGELES, CA 90064								
7. Transporter 1 Company Name Clean Harbors Environmental Service, Inc.		8. U.S. EPA ID Number MA0000007237								
9. Transporter 2 Company Name Action Resources Inc.		10. U.S. EPA ID Number TX0000007237								
11. Designated Facility Name and Address Clean Harbors Deer Park, LLC 2027 Independence Parkway South La Porte TX 77571 Facility's Phone: 2819302300		12. U.S. EPA ID Number TX0000007237								
GENERATOR	13. U.S. DOT Description and Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any)	14. Container		15. Total Quantity	16. Unit	17. Date				
		No.	Type							
	X UN2814. INFECTIOUS SUBSTANCES AFFECTING HUMANS (SHARPS), 6.2	1	DF	40	P	3/22/16				
18. Special Handling Instructions and Additional Information CH159479 1X5 GAL DF 1000 1X16 GAL DF										
19. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper U.S. DOT description, hazard class, ID number, hazard labels and labels and packing group and are in proper condition for transport according to applicable international and national governmental regulations. If export, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste material is a statement of a large quantity generator only (if a large quantity generator is true).										
20. Generator's/Offeror's Printed Name and Signature Michael Milken 3/22/16										
TRANSPORTER	21. Intermodal Shipment: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. <input type="checkbox"/> Port of Entry/Exit <input type="checkbox"/> Entry into U.S.									
	22. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed Name and Signature: ESTEVAN DE LA TORRE 3/22/16									
DESIGNATED FACILITY	Transporter 2 Printed Name and Signature: Niek Saragosa 3/24/16									
	23. Designated Facility: <input type="checkbox"/> Quantity <input type="checkbox"/> Residue <input type="checkbox"/> Port of Receipt									
24. Alternate Facility (if Generator): <input type="checkbox"/> Manifest Reference Number: <input type="checkbox"/> U.S. EPA ID Number: <input type="checkbox"/>										
25. Signature of Alternate Facility (if applicable): <input type="checkbox"/>										
26. Hazardous Waste Report Management Method Codes (codes for hazardous waste treatment, disposal, and recycling systems) H040										
27. Designated Facility: <input type="checkbox"/> Certification of receipt of hazardous materials covered by the manifest except as noted in item 26a Printed Name: Sandy Beach Signature: Sandy Beach 3/27/16										

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

Clean Harbors has the appropriate permits for and will accept the waste the generator is shipping. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

SC MA PPW 2/19/2016

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number
CA 911111019

2. Page 1 of 1

3. Emergency Response Phone
(800) 483-3718

4. Manifest Tracking Number
009494536

FILE

5. Generator's Name and Mailing Address
Los Angeles City of Bos

**2714 Media Center Drive Watershed Protection Division # 7025
Los Angeles, CA 90065**

Generator's Phone: **(323) 342-1571** ATTN: Steve Pedersen

Generator's Site Address (if different than mailing address)

300 N JUANITA AVE

LOS ANGELES CA 90004

6. Transporter 1 Company Name

Clean Harbors Environmental Service, Inc.

U.S. EPA ID Number

MAD039322250

7. Transporter 2 Company Name

SLT Express WNY Inc

U.S. EPA ID Number

A2R000513770

8. Designated Facility Name and Site Address

**Clean Harbors Aragonite LLC
11600 North Aptus Road
Grantsville, UT 84029**

U.S. EPA ID Number

UTD981552177

Facility's Phone: **4358848100**

9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))

10. Containers

No.

Type

11. Total Quantity

12. Unit Wt./Vol.

13. Waste Codes

1. **NONE, NON-RCRA HAZARDOUS WASTE, SOLIDS, (HUMAN FECES), N/A**

3

DF

80

P

322 352 531

14. Special Handling Instructions and Additional Information

1. **LASTM-2222 3X 56 GAL DF INTO 5X 16 GAL DF**

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offor's Printed/Typed Name

Michael Miller

Signature

[Signature]

Month Day Year

3 22 16

16. International Shipments

☐ Import to U.S.

☐ Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter signature (for exports only):

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

ESTEVAN DE LA TORRE

Signature

[Signature]

Month Day Year

03 22 16

Transporter 2 Printed/Typed Name

Dana Jansson

Signature

[Signature]

Month Day Year

3 31 16

18. Discrepancy

18a. Discrepancy Indication Space

☐ Quantity

☐ Type

☐ Residue

☐ Partial Rejection

☐ Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

18b. Alternate Facility (or Generator)

Facility's Phone:

18c. Signature of Alternate Facility (or Generator)

Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. **H040**

2.

3.

4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a

Printed/Typed Name

Natasha Scott

Signature

[Signature]

Month Day Year

14 14 16

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21 Generator ID Number CAS111111019	22 Waste 2	23 Manifest Tracking Number 009494559 FLE	
24 Generator Name Los					
25 Transporter 3 Company Name Clean Harbors					
26 Manifest Number MA0039302250					
27 Date of Receipt 1/20					
28 Description of Waste and Proper Shipping Name (Use U.S. DOT Hazardous Material Regulations)					
29 Quantity					
30 Date of Receipt					
31 Date of Shipment					
32 Date of Receipt					
33 Date of Shipment					
34 Date of Receipt					
35 Date of Shipment					
36 Date of Receipt					
37 Date of Shipment					
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99 Date of Shipment					
100 Date of Receipt					



CASE #26035

Non-Infectious Certification

To: Clean Harbors Environmental Services, Inc.

I hereby certify that the waste material being shipped to Clean Harbors under Profile # 26035-222 has been rendered non-infectious and is neither infectious nor does it contain any organisms known to be a threat to human health. (this also includes materials which contain or have come into contact with tissue or body fluids derived from human or animal source)

This certification is based upon my knowledge of the material and:

- ☐ The waste was never exposed to potentially infectious materials.
☐ The following method of disinfection was employed:

Chemical Sterilization* Other:

*Common Disinfectants	Check
Bleach Solutions ¹	<input checked="" type="checkbox"/>
Formaldehyde	<input type="checkbox"/>
Glutaraldehyde	<input type="checkbox"/>
Phenol	<input type="checkbox"/>
Other / Cleaners: (please specify) <u> </u>	<input type="checkbox"/>

THIS IS TO CERTIFY that the above is an accurate description of the methods used and all contents are specified and known.

Authorized signature: Generator Name: Michael MikeDate: 3/22/16Address:

¹ The Department of Labor (DOL) has acknowledged, and in agreement with the recommendations of the U.S. Public Health Service Centers for Disease Control, that a solution of 5.25% sodium hypochlorite diluted 1:10 with water is effective for disinfecting. Therefore, this is an acceptable method of disinfecting/sterilizing possibly contaminated waste

